

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	RH	72192	5/9/00
O.I.P.E. CLASSIFIER	RSB		5/12/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	MB	70303	7-9

INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
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**WARNING**  
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Possession of

Form PTO-438  
(Rev. 6/99)

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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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